Department of Insurance LICENSING REQUEST FORM

The process to obtain Kentucky criminal background checks through the CourtNet Disposition System are as follows:

Requesting a criminal background check for the purpose of obtaining a License with the Department of Insurance requires a \$10.00 fee (Check or money order made payable to the KENTUCKY STATE TREASURER). Completely fill out this form and enclose two postage paid envelopes. One should be addressed to the Department of Insurance and the other back to your address. Both of you will receive the same report. If you have any questions, please contact Pretrial Services Records Division at (502) 573-1682 or (800) 928-6381.

Mail request to this address: ADMINISTRATIVE OFFICE OF THE COURTS

PRETRIAL SERVICES RECORDS DIVISION 100 MILLCREEK PARK FRANKFORT KY 40601

PLEASE **PRINT OR TYPE** THE INFORMATION CLEARLY

Last Name Social Security Number	First Name		Middle Name	(Jr., Sr., etc.)
Social Security Number Address	Mo Day City	Year	Alias/Maiden Nau State	<u>Zip</u>
I understand that failure to accurately provide the information requested may result in my prosecution under K.R.S. 523.100				
Signature of Licensee			Date	
Department of Insurance Agent Licensing Division 215 W. Main Street P.O. Box 517 Frankfort, KY 40602 (502) 564-6004		F	For Office Use O	only
e-mail: doiagentlicensingmail@mail.state.ky.us				

FAILURE TO COMPLY WITH ALL PROCEDURES WILL RESULT IN THIS DOCUMENT BEING RETURNED UNPROCESSED